

P07000102607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

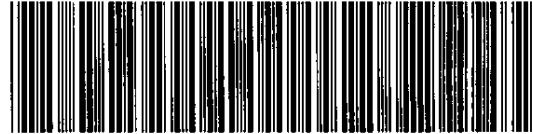
(Business Entity Name)

(Document Number)

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APPROVED  
AND  
FILED  
10 SEP - 1 PM '10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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9/9/10  
TL

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** FUN TRAVEL VENTURES, INC

**DOCUMENT NUMBER:** P07000102607

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOAN CRAFT  
Name of Contact Person

1930 DEL PRADO BLVD, NW  
Firm/ Company  
Address

CAPE CORAL, FL 33990  
City/ State and Zip Code

WEKNOWBACKS @ AOL.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOAN CRAFT at (239) 994-2732  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |                                          |                                                                        |                                                                                                  |                                                                                                                         |
|------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is enclosed) |
|------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

*[Handwritten signature]*  
6-29-2000



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2010 SEP -1 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

August 19, 2010

JOAN CRAFT  
3129 APACHE ST  
FT MYERS, FL 33916

SUBJECT: FUN TRAVEL VENTURES, INC.  
Ref. Number: P07000102607

We have received your document for FUN TRAVEL VENTURES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 210A00019992

Articles of Amendment  
to  
Articles of Incorporation  
of

FUN TRAVEL VENTURES, INC.  
(Name of Corporation as currently filed with the Florida Dept. of State)

P07000102607

(Document Number of Corporation (if known))

APPROVED  
AND  
FILED

10 SEP -1 PM 12:41  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

VENTURES ~~INC~~ OF LIFE, INC The new  
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the  
abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation  
name must contain the word "chartered," "professional association," or the abbreviation "P.A."

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

3129 LAFAYETTE ST  
FOOT MYERS, FL  
33910

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

3129 LAFAYETTE ST  
FOOT MYERS, FL  
33910

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the  
new registered agent and/or the new registered office address:**

Name of New Registered Agent:

NA stays the same

New Registered Office Address:

NA stays the same  
(Florida street address)

(City)

\_\_\_\_\_, Florida  
(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

NA

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

NA

Signature of New Registered Agent, if changing

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**  
(Attach additional sheets, if necessary)

Title	Name	Address	Type of Action
Dir.	CRAFT, J.	LA FAYETTE 3129 E ST FORT MYERS, FL 33910	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change address
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

Change address

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

I. Change of name to "VENTURES ~~INC.~~ OF WIFE"

II. Change of address to: 3129 LAFAYETTE ST  
FORT MYERS, FL 33910

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
(if not applicable, indicate N/A)

NA

The date of each amendment(s) adoption: 8/16/10  
(date of adoption is required)  
Effective date if applicable: 7-1-2010  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ① name change  
② address change
- ☒ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by JM Craft  
(voting group)"

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 8-16-2010

Signature

JM Craft  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JOAN M. CRAFT

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)